## **Chronic Disease Indicators: Indicator Definition**



## Activity limitation due to arthritis among adults aged >=18 years

Category: Arthritis

Demographic Group: Resident persons aged >=18 years.

Numerator: Respondents aged >=18 years who report having doctor-diagnosed arthritis and an activity

limitation due to arthritis or joint symptoms.

Denominator: Respondents aged >=18 years (excluding unknowns and refusals).

Measures of Frequency: Annual prevalence with 95% confidence interval.

Time Period of Case

Definition:

Current.

Background: There are about 46 million adults with doctor-diagnosed arthritis and 18.9 million have

arthritis-attributable activity limitation. By 2030, 25 million (9.3% of the adult population) are projected to report arthritis-attributable activity limitations.\* In 2003 arthritis cost an estimated \$128

billion (direct medical and indirect costs). \*\*

Significance: Monitoring the prevalence of arthritis-attributable activity limitation among the general population of

adults is important for estimating the state-specific burden of arthritis, the need for intervention programs to reduce the disabling effects of arthritis, and to estimate how well existing intervention programs are working. These programs include self-management education programs that have been shown to reduce pain and costs, and physical activity programs that have been shown to improve

physical function, mental health, and quality of life.

Limitations of Indicator: Doctor-diagnosed arthritis is self-reported in BRFSS and was not confirmed by a health-care

provider or objective monitoring; however, such self-reports have been shown to be acceptable for surveillance purposes\*\*\*. Activity limitation is also self-reported. Comparisons of tabular data between states should be made with caution because the prevalence estimates are not adjusted for population characteristics (e.g., age) that might explain state-to-state differences. Unadjusted data are presented in this report to provide actual estimates to help in state-level program planning.

Data Resources: Behavioral Risk Factor Surveillance System (BRFSS).

http://www.cdc.gov/arthritis/data statistics/index.htm

Limitations of Data

Resources:

As with all self-reported sample surveys, BRFSS data might be subject to systematic error resulting from noncoverage (e.g., lower telephone coverage among populations of low socioeconomic status, exclusion of people without land lines, persons in the military, or those residing in institutions), nonresponse (e.g., refusal to participate in the survey or to answer specific questions), or measurement (e.g., social desirability or recall bias).

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Objectives:

2-2. Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms.

<sup>\*</sup> Hootman JM, Helmick CG. Projections of US prevalence of arthritis and associated activity limitations. Arthritis Rheum 2006;54:226-9.

<sup>\*\*</sup> Yelin E, Cisternas M, Foreman A, Pasta D, Murphy L, Helmick C. National and state medical expenditures and lost earnings attributable to arthritis and other rheumatic conditions—United States, 2003. MMWR 2007;56(1):4–7.

\*\*\* Sacks JJ, Harrold LR, Helmick CG, Gurwitz JH, Emani S, Yood RA. Validation of a surveillance case definition for arthritis. J Rheumatol 2005;32:340–7